

**CLAIMS ONLY**

<p>Application Number  <b>1008501</b></p>	<p>Filing Date  <b> </b></p>
<p>Applicant(s)  <b> </b></p>	

Applicant(s)

**Filing Date**

*\* May be used for additional claims or amendments*

						Application Number <i>10805011</i>	Filing Date					
CLAIMS ONLY						Applicant(s)						
						• May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1							51					
2							52					
3							53					
4							54					
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45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					